

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/808,908 Confirmation No. 7410
 Applicant : GUIDRY, David Walker
 Filed : 03/25/2004
 TC/A.U. : 2819
 Examiner : Jeanglaude, Jean Bruner
 Docket No. : TI-37090
 Customer No. : 23494
 For : SYSTEM AND METHOD FOR SUCCESSIVE APPROXIMATION

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DEC 23 2005

RESPONSE TO OFFICIAL ACTION UNDER 37 C.F.R. §1.111
TRANSMITTAL FORM

Mail Stop Amendment

Commissioner for Patents

P. O. Box 1450

Alexandria, VA 22313-1450

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following papers are being transmitted by facsimile to the U.S. Patent and Trademark Office at 571-273-8300.

Lottie Davis

Date

Sir:

1. Transmitted herewith is an amendment for this application.

STATUS

2. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply. Applicant is other than a small entity.

- (a) ☐ Applicant petitions for an extension of time under 37 CFR 1.136 (fees: 37 CFR 1.17(a)-(d) for other total number of months checked below:

	Extension (months)	Fee for other than small entity
<input type="checkbox"/>	one month	\$ 120.00
<input checked="" type="checkbox"/>	two months	\$ 450.00
<input type="checkbox"/>	three months	\$ 1,020.00
<input type="checkbox"/>	four months	\$ 1,590.00

Fee \$ 450.00

If an additional extension of time is required please consider this a petition therefore.

Serial Number 10/808.908

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12/28/2005 EFLORES 00000042 200668
01 FC:1252 450.00 DA

☐ An extension for _____ months has already been secured and the fee paid therefore of \$ _____ is deducted from the total fee due for the total months of extension now requested.

☒ Extension fee due with this request \$ 450.00

OR

(b) ☐ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID	PRESENT EXTRA	RATE	ADDITIONAL FEE
Total Claims	22	Minus	26	= 0	x \$18 =	\$ 0
Independent Claims	3	Minus	3	= 1	x \$86 =	\$ 0
TOTAL ADDITIONAL FEE FOR THIS AMOUNT						\$ 0

(c) ☐ No additional fee for claims is required.

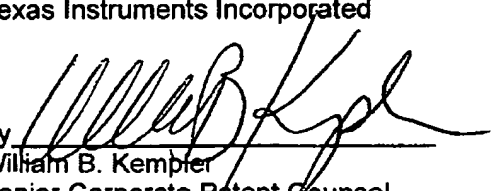
OR

(d) ☐ Total additional fee for claims required \$ _____

FEE PAYMENT

If any additional extension and/or fee is required, charge Deposit Account No. 20-0668 and/or if any additional fee for claims is required, charge Deposit Account No. 20-0668. Two copies of this sheet are enclosed.

Respectfully submitted,
Texas Instruments Incorporated

By 
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Lottie Davis

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FACSIMILE COVER SHEET

<input checked="" type="checkbox"/> FACSIMILE COVER SHEET	<input type="checkbox"/> AMENDMENT
<input type="checkbox"/> NEW APPLICATION	<input checked="" type="checkbox"/> EOT - 3 Mnth
<input type="checkbox"/> DECLARATION	<input type="checkbox"/> NOTICE OF APPEAL
<input type="checkbox"/> ASSIGNMENT	<input type="checkbox"/> APPEAL
<input type="checkbox"/> Recordation Form	<input type="checkbox"/> ISSUE FEE
<input type="checkbox"/> FORMAL DRAWINGS	<input type="checkbox"/> REQUEST FOR CONTINUED
<input type="checkbox"/> INFORMAL DRAWINGS	<input type="checkbox"/> EXAMINATION
<input type="checkbox"/> CONTINUATION APP'N	<input checked="" type="checkbox"/> RESPONSE TO OFFICIAL ACTION
<input type="checkbox"/> DIVISIONAL APP'N	<input type="checkbox"/> UNDER 1.111 & Trans (11)

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